

# Work Order ID 106742

September-11-13 11:35:16 AM

**\*106742\***

Page 1

Item ID: D3874-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Floor Protector - Copilot (Sub-Comp D206-781-011)  
 Start Date: 9/06/13 Start Qty: 1.00 **\*1\***  
 Required Date: 9/11/13 Req'd Qty: 1.00 **\*1\*** Cust Item ID:  
 Reference: Customer:

Approvals: Process Plan: MLJ Date: 13-09-16 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_  
 Run Start **\*NR1\***  
 Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr                       | Revision Nbr             |                      |         |        |              |               |               |                  |                |
| D3874                          | Rev A                    |                      |         |        |              |               |               |                  |                |

100 0.00  
**\*100\***  
 HandThermo Memo 0.00 28+43  
 Hand Finishing Thermoforming 1-Cut Sheet to required Blank size x2 DAJ 07 2-83 13/10/02

105 0.00  
**\*105\***  
 HandThermo Dry Material 0.00  
 Hand Finishing Thermoforming Dry Sheet as per QSI022 POLYCARBONATE  
 Temp: 240°F  
 Time IN: 7:00 pm 13/10/01  
 Time OUT: 7:00 am 13/10/02 x2 DAJ 07 2-83 13/10/02

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause                             | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling <input type="checkbox"/> |      |      |     |   |                   |                    |             |              |              |
| Operator <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Material <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Setup <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Other <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Process <input type="checkbox"/>       |      |      |     |   |                   |                    |             |              |              |
| Supplier <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Training <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Unapproved <input type="checkbox"/>    |      |      |     |   |                   |                    |             |              |              |

### FAULT CATEGORY

|   |   |   |
|---|---|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |
|---|---|---|

☐ Ovalized  
☐ Over/Under tolerance  
☐ Part Incorrect  
☐ Part Lost/Missing  
☐ Part Moved  
☐ Positioned Wrong  
☐ Power Loss/Surge

☐ Pressure/Forced  
☐ Temperature/Cure  
☐ Weld  
☐ Wrong Stock Pulled  
☐ Other

# Work Order ID 106742

September-11-13 11:35:16 AM

**\*106742\***

Page 2

Item ID: D3874-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Floor Protector - Copilot (Sub-Comp D206-781-011)  
Start Date: 9/06/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
Required Date: 9/11/13 Req'd Qty: 1.00 **\*1\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description  | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp                |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|-------------------------------|
| 110                            |   | 0.00                 |         |        |              |               |               |                  |                               |
| <b>*110*</b>                   |   |                      |         |        |              | x2            |               |                  | Jh<br>13/10/02                |
| Thermoform                     | <b>Memo</b>   | 0.00                 |         |        |              |               |               |                  |                               |
| Thermoforming Machine          | 1-Machine Set-Up<br>2-Pre-heat Tool to required temp.<br>3-Thermoform as per Dwg and Folio #FTA038 using tool DT9474<br>Dwg Rev: <u>A</u><br>Folio Rev: <u>B</u><br><br>Visually inspect for proper formation and texture |                      |         |        |              |               |               |                  |                               |
| 140                            |   | 0.00                 |         |        |              |               |               |                  |                               |
| <b>*140*</b>                   |   |                      |         |        |              | x2            |               |                  | DAS<br>07<br>2-03<br>13/10/04 |
| HandThermo                     | <b>Memo</b>   | 0.00                 |         |        |              |               |               |                  |                               |
| Hand Finishing Thermoforming   | 1-Trim to finished dimensions as per Dwg  |                      |         |        |              |               |               |                  |                               |
| 150                            | QC2- Inspect parts off machine FAI/FAIB   | 0.00                 |         |        |              |               |               |                  |                               |
| <b>*150*</b>                   |   |                      |         |        |              | x2            |               |                  | DAS<br>07<br>2-03<br>13/10/04 |
| QC                             | <b>Memo</b>   | 0.00                 |         |        |              |               |               |                  |                               |
| Quality Control                | Complete FAI document   |                      |         |        |              |               |               |                  |                               |

NCR: Yes / No

# WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |      |      |   |   |                   |   |             |              |  |  |   |  |
|---|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |  |
| Root Cause  | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Operator <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Material <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Setup <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Other <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Process <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Supplier <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Training <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Unapproved <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>FAULT CATEGORY</b>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |

**Work Order ID 106742**

September-11-13 11:35:16 AM

**\*106742\***

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Item ID: D3874-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Floor Protector - Copilot (Sub-Comp D206-781-011)

Start Date: 9/06/13 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 9/11/13 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

160

QC5- Inspect part completeness to step on W/O

0.00

**\*160\***

QC

Memo

0.00

Quality Control

② 13-10-04 PD

170

Identify as per dwg &amp; Stock Location: \_\_\_\_\_

0.00

**\*170\***

Packaging

Memo

PPPW 6135

0.00

Packaging

13/10/9 ② **DAS 32 9-89**

180

QC21- Final Inspection - Work Order Release

0.00

**\*180\***

QC

Memo

0.00

Quality Control

JA / RL 13-10-10  
MF 13-10-09

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |  |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|--|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>   | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>   | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>  |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |   |                   |                    |             |              |              |
| Operator      |      |      |     |   |                   |                    |             |              |              |
| Material      |      |      |     |   |                   |                    |             |              |              |
| Setup         |      |      |     |   |                   |                    |             |              |              |
| Other         |      |      |     |   |                   |                    |             |              |              |
| Process       |      |      |     |   |                   |                    |             |              |              |
| Supplier      |      |      |     |   |                   |                    |             |              |              |
| Training      |      |      |     |   |                   |                    |             |              |              |
| Unapproved    |      |      |     |   |                   |                    |             |              |              |

### FAULT CATEGORY

|   |   |   |   |
|---|---|---|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |
|---|---|---|---|

# Picklist Print

September-11-13 11:35:15 AM

Page 1  
1

Work Order ID: 106742

Parent Item: D3874-1

Parent Item Name: Floor Protector - Copilot (Sub-Comp D206-781-011)

Start Date: 9/06/13

Required Date: 9/11/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev A 09.02.06 New Issue DL  
Material 10/04/21 DL

IPP Rev B Add Step 105 Dry

| Component Item ID/<br>Item Name   | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|-----------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| MLEXS.118-90318-08<br>Lexan Sheet |                        | Purchased     | No          |                     |                  | 100             | sf                 | 373.0800       | 4.38        | 4.38         |               |                |        |

Location

therm

113127

Loc Qty

373.08

373.08

Loc Code

4.38 sq ft.

13/10/04

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause                             | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling <input type="checkbox"/> |      |      |     |   |                   |                    |             |              |              |
| Operator <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Material <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Setup <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Other <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Process <input type="checkbox"/>       |      |      |     |   |                   |                    |             |              |              |
| Supplier <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Training <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Unapproved <input type="checkbox"/>    |      |      |     |   |                   |                    |             |              |              |

### FAULT CATEGORY

| Landing Gear  | General                                 | Other  |
|---|---|--|
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           |
| <input type="checkbox"/> Crushed/Crimped              | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Misabeled                       |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |
|   |   | <input type="checkbox"/> Ovalized                        |
|   |   | <input type="checkbox"/> Over/Under tolerance            |
|   |   | <input type="checkbox"/> Part Incorrect                  |
|   |   | <input type="checkbox"/> Part Lost/Missing               |
|   |   | <input type="checkbox"/> Part Moved                      |
|   |   | <input type="checkbox"/> Positioned Wrong                |
|   |   | <input type="checkbox"/> Power Loss/Surge                |
|   |   | <input type="checkbox"/> Pressure/Forced                 |
|   |   | <input type="checkbox"/> Temperature/Cure                |
|   |   | <input type="checkbox"/> Weld                            |
|   |   | <input type="checkbox"/> Wrong Stock Pulled              |
|   |   | <input type="checkbox"/> Other _____                     |



|                              |        |              |         |
|------------------------------|--------|--------------|---------|
| DART AEROSPACE LTD           |        | Work Order:  | 106742  |
| Description: Floor Protector |        | Part Number: | D3874-1 |
| Inspection Dwg: D3874        | Rev: A | Page 1 of 1  |         |

### FIRST ARTICLE INSPECTION CHECKLIST

☒ First Article ☐ Prototype

#### THERMOFORMING SECTION

| Description   | Accept | Reject | Method of Inspection | Comments |
|---|--------|--------|----------------------|----------|
| Inside Radii less than <u>3/16</u> "                            | ✓      |        |                      |          |
| Shape Definition  | ✓      |        |                      |          |
| Texture Retention   | ✓      |        |                      |          |
| Material imperfections such as bumps, cracks, voids, scratching | ✓      |        |                      |          |
|   |        |        |                      |          |
|   |        |        |                      |          |
|   |        |        |                      |          |
|   |        |        |                      |          |

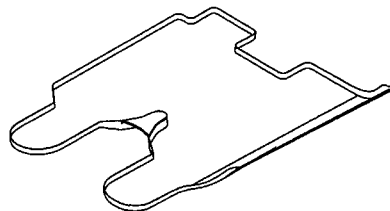
|              |           |       |          |
|--------------|-----------|-------|----------|
| Measured by: | <i>DL</i> | Date: | 13/10/02 |
|--------------|-----------|-------|----------|

#### TRIMMING SECTION

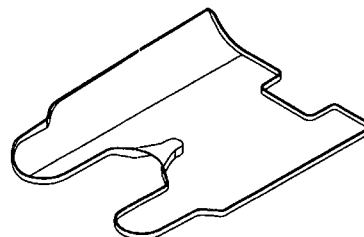
| Drawing Dimension | Tolerance | Actual Dimension | Accept | Reject | Method of Inspection | Comments  |
|-------------------|-----------|------------------|--------|--------|----------------------|-----------|
| 0.050             | Min       | 0.063"           | ✓      |        |                      | CAL TH-DT |
| 0.065             | Min       | 0.078"           | ✓      |        |                      | CAL TH-DT |
| 0.5               | Min       | 0.52"            | ✓      |        |                      | Uom DL-02 |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |
|                   |           |                  |        |        |                      |           |

|                     |                                       |       |          |
|---------------------|---------------------------------------|-------|----------|
| Measured by:        | <i>DL</i>                             | Date: | 13/10/04 |
| Audited by:         | <b>DAS</b><br><b>9</b><br><b>0-89</b> | Date: | 13-10-04 |
| Prototype Approval: | N/A                                   | Date: | N/A      |

| Rev | Date     | Change    | Revised by | Approved  |
|-----|----------|-----------|------------|-----------|
| A   | 09.09.15 | New Issue | KJ         | <i>DL</i> |



**D3874-1 FLOOR PROTECTOR**



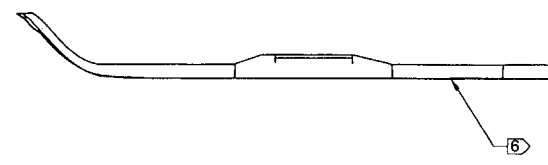
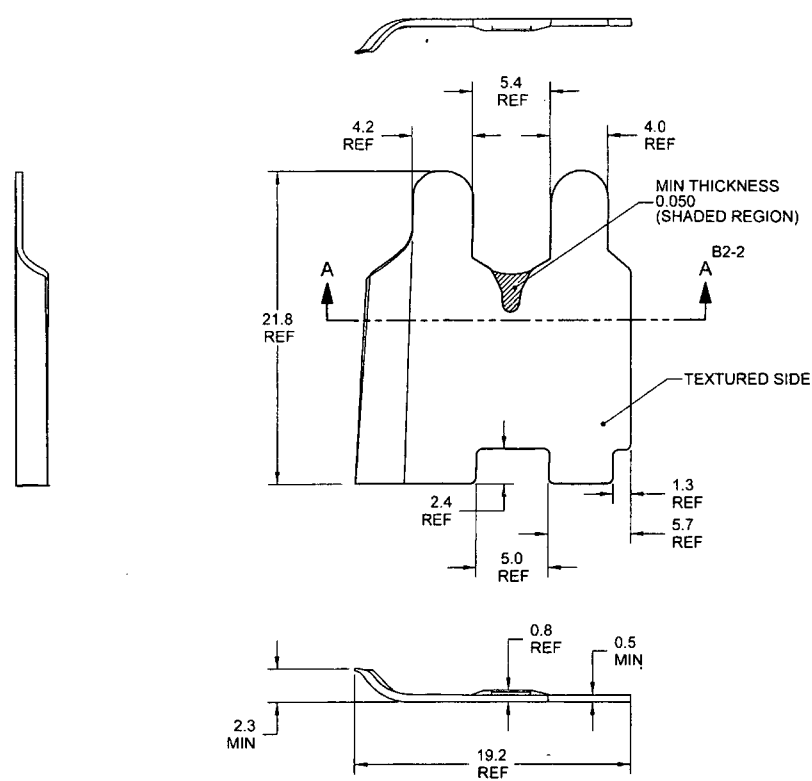
**D3874-2 FLOOR PROTECTOR**

106742 MJS  
13-09-16

**RELEASED**  
29/05/2016

|            |             |  |              |
|------------|-------------|--|--------------|
| A          | NEW ISSUE   | PH   | 09.01.29     |
| REV.       | DESCRIPTION | BY   | DATE         |
| DESIGN     | PH          | DART AEROSPACE LTD   |              |
| DRAWN      | PH          | HAWKESBURY, ONTARIO, CANADA  |              |
| CHECKED    |             | DRAWING NO.  | REV. A       |
| MFG. APPR. |             | D3874  | SHEET 1 OF 3 |
| APPROVED   |             | TITLE  | SCALE        |
| DE APPR.   |             | FLOOR PROTECTOR  | NTS          |
| DATE       | 09.01.29    | <small>COPYRIGHT © 2009 BY DART AEROSPACE LTD<br/>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS<br/>NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br/>WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> |              |

106742



SECTION A-A  
SCALE 2X

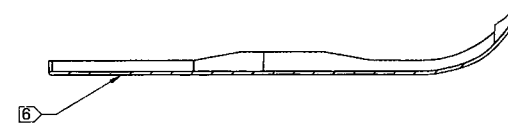
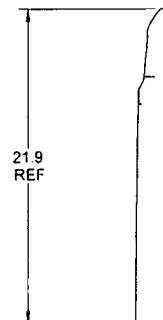
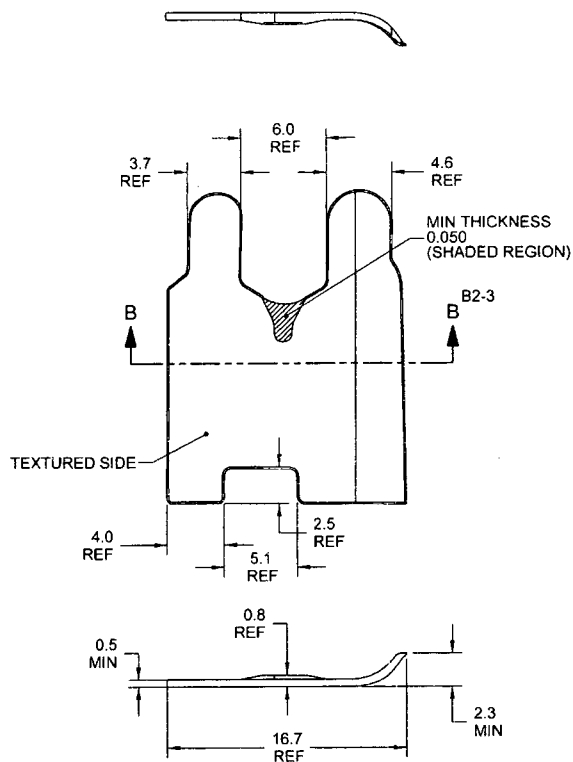
D3874-1 FLOOR PROTECTOR

RELEASED  
9/25/54

- NOTES:
- 1) MATERIAL: LEXAN 90318 (PROTECT-A-GLAZE), 0.118 THICK, 112-CLEAR (MLEXS.118-90318-08)
  - 2) FINISH: NONE
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3874-1" USING VIBRATING STYLUS
  - 7) WEIGHT: 1.5 lbs
  - 8) TOOLING: THERMOFORM PER MOLD DT9474 PER DART QSI 022. TRIM PER MOLD
  - 9) MINIMUM THICKNESS: 0.050" ON FLANGES AND 0.065" ELSEWHERE EXCEPT AS SHOWN

|   |                    |  |              |
|---|--------------------|--|--------------|
| DESIGN  | <i>PJH</i>         | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN   | <i>PJH</i>         | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED   | <i>[Signature]</i> | DRAWING NO.                            | REV. A       |
| MFG. APPR.  | <i>[Signature]</i> | D3874                                  | SHEET 2 OF 3 |
| APPROVED  | <i>[Signature]</i> | TITLE                                  | SCALE        |
| DE APPR.  | <i>[Signature]</i> | FLOOR PROTECTOR                        | NTS          |
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106742



SECTION B-B  
SCALE 2X

# D3874-2 FLOOR PROTECTOR

RELEASED  
29/05/05

## NOTES:

- 1) MATERIAL: LEXAN 90318 (PROTECT-A-GLAZE), 0.118 THICK, 112-CLEAR (MLEXS.118-90318-08)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3874-2" USING VIBRATING STYLUS
- 7) WEIGHT: 1.5 lbs
- 8) TOOLING: THERMOFORM PER MOLD DT9474 PER DART QSI 022. TRIM PER MOLD
- 9) MINIMUM THICKNESS: 0.050" ON FLANGES AND 0.055" ELSEWHERE EXCEPT AS SHOWN

|   |          |  |              |
|---|----------|--|--------------|
| DESIGN  | AS       | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN   | AS       | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED   | AS       | DRAWING NO.                            | REV. A       |
| MFG. APPR.  | AS       | D3874                                  | SHEET 3 OF 3 |
| APPROVED  | AS       | TITLE                                  | SCALE        |
| DE APPR.  | AS       | FLOOR PROTECTOR                        | NTS          |
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